

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVN5674PCA</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>09/08/2009</b>
NAME OF PROVIDER OR SUPPLIER  <b>ABC HOME HEALTH CARE</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>625 FAIRVIEW DRIVE SUITE 103 CARSON CITY, NV 89701</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
P 000	<p>Initial Comments</p> <p>Surveyor: 27118 This findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>This Statement of Deficiencies was generated as a result of the initial State Licensure survey conducted in your agency on September 8, 2008. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The agency has applied for a license as a Personal Care Agency which provides in-home personal care services to elderly and disabled persons. The census at the time of the survey was one client. One client file was reviewed and two employee files were reviewed.</p> <p>The following deficiencies were identified:</p>	P 000		
P 080	<p>Section 14.1(4) Administrator Responsibility Abuse/Neglect</p> <p>4. The administrator of an agency shall ensure that: (a) The clients of the agency are not abused, neglected or exploited by an attendant or another member of the staff of the agency, or by any person who is visiting the client when an attendant or another member of the staff of the agency is present; and (b) Suspected cases of abuse, neglect or exploitation of a client are reported in the manner prescribed in NRS 200.5093 and 632.472.</p>	P 080		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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P 080	Continued From page 1  This STANDARD is not met as evidenced by: Surveyor: 27118  Based on record review, the agency failed to have a policy to ensure that clients are not abused and how to report suspected cases of abuse, neglect or exploitation or a client.  Findings include:  The agency policy and procedure manual was reviewed. There was not a policy indicating the manner in which the agency would ensure clients were not abused, neglected or exploited. There was not a policy or procedure to direct the attendant suspecting these actions, how to report the abuse.	P 080			
P 140	Section 15(5) Infectious Disease  5. Provide for the prevention, control and investigation of infections and communicable diseases;  This STANDARD is not met as evidenced by: Surveyor: 27118 Based on record review, the agency did not have a policy to provide for the investigation of infections and communicable diseases.  Findings include:  The agency policy and procedure manual was reviewed. There was no documentation of a policy or procedure describing how the agency would investigate infections and communicable diseases.	P 140			

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P 200	<p>Section 15(11 Performance Evaluation</p> <p>11. Provide for periodic evaluations of the performance of attendants and other members of the staff of the agency;</p> <p>This STANDARD is not met as evidenced by: Surveyor: 27118 Based on record review the agency did not have a policy providing for periodic performance evaluations of staff.</p> <p>Findings include:</p> <p>The agency policy and procedure manual was reviewed. No policy was located which provided for periodic evaluations of attendants and other staff members of the agency.</p>	P 200			
P 340	<p>Section 19.1(c)(6)(I-III) Training</p> <p>Sec. 19. 1. Each attendant of an agency shall: (c) Receive training: (6) That is specifically related to the personal care services provided by the agency, including, as applicable, training in the following topics: (I) Duties and responsibilities of attendants and the appropriate techniques for providing personal care services; (II) Recognizing and responding to emergencies, including, without limitation, fires and medical emergencies; (III) Dealing with adverse behaviors;</p> <p>This STANDARD is not met as evidenced by: Surveyor: 27118 Based on record review, the agency failed to</p>	P 340			

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P 340	Continued From page 3  ensure that 2 of 2 attendants received training in dealing with adverse behaviors. The agency did not have a training module to address adverse behaviors.	P 340			
P 360	Section 19.1(c)(6)(V) Training Bowel/Bladder  Sec. 19. 1. Each attendant of an agency shall: (c) Receive training: (6) That is specifically related to the personal care services provided by the agency, including, as applicable, training in the following topics: (V) Bowel and bladder care, including, without limitation, routine care associated with toileting, routine maintenance of an indwelling catheter drainage system such as emptying the bag and positioning, routine care of colostomies such as emptying and changing the bag, signs and symptoms of urinary tract infections, and common bowel problems, including, without limitation, constipation and diarrhea;  This STANDARD is not met as evidenced by: Surveyor: 27118 Based on record review on , the agency failed to ensure that 2 of 2 attendants received training in bowel and bladder care as required. The agency did not have a training module to cover colostomy or catheter care.	P 360			
P 430	Section 20.1(2) Disclosure Statement  2. The written disclosure statement must include a description of and information concerning the personal care services offered by the agency, including, without limitation:	P 430			

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P 430	<p>Continued From page 4</p> <p>(a) A statement which is easily understandable to the client indicating that it is not within the scope of the license of the agency to manage the medical and health conditions of clients should the conditions become unstable or unpredictable;</p> <p>(b) The qualifications and training requirements for the attendants who provide personal care services to the clients of the agency;</p> <p>(c) The charges for the personal care services provided by the agency;</p> <p>(d) A description of billing methods, payment systems, due dates for bills for personal care services and the policy for notifying clients of increases in the costs of personal care services provided by the agency;</p> <p>(e) The criteria, circumstances or conditions which may result in the termination of personal care services by the agency and the policy for notifying clients of such termination of personal care services;</p> <p>(f) Procedures for contacting the administrator of the agency or his designee during all hours in which personal care services are provided and the on-call policy of the agency; and</p> <p>(g) Information concerning the rights of clients and the grievance procedure of the agency.</p> <p>This STANDARD is not met as evidenced by: Surveyor: 27118 Based on record review, the agency disclosure statement provided to 1 of 1 clients failed to contain all of the required information.</p> <p>Findings include:</p> <p>One client file was reviewed. The files for Client #1 and failed to contain the following required</p>	P 430			

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P 430	Continued From page 5  disclosure information such as:  (a) A statement which is easily understandable to the client indicating that it is not within the scope of the license of the agency to manage the medical and health conditions of clients should the conditions become unstable or unpredictable;  (b) The qualifications and training requirements for the attendants who provide personal care services to the clients of the agency.	P 430			

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